● PRINTER RUSH ●
(PTO ASSISTANCE)

TC Printing

Application : 09\905,248	**Examiner :** Helms, L.	**GAU :** 1642
From: RH	**Location:** IDC *FMF* FDC	**Date:** 7/1/05

Tracking #: _____   Week Date: _____

DOC CODE	DOC DATE	MISCELLANEOUS
☐ 1449	_____	☐ Continuing Data
☐ IDS	_____	☐ Foreign Priority
☐ CLM	_____	☐ Document Legibility
☐ IIFW	_____	☑ Fees
☐ SRFW	_____	☐ Other
☐ DRW	_____	
☐ OATH	_____	
☐ 312	_____	
☐ SPEC	_____	

[RUSH] MESSAGE: Fees.

There is no fee stamp. Please charge Issue fee per 85B. Thank You
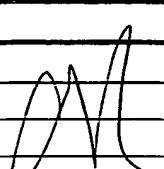
[XRUSH] RESPONSE: _____
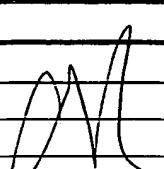
INITIALS:

NOTE: This form will be included as part of the official USPTO record, with the Response document coded as XRUSH.

REV 10/04

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Complete and send this form, together with applicable fee(s), to: **Mail**

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INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

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7590   02/25/2005

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DIANE W. HAZATA _____ (Depositor's name)
Diane W. Halata _____ (Signature)
april 5, 2005 _____ (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/905,243	07/16/2001	Alexander H. Taylor	PS0770X1C1	4165

TITLE OF INVENTION: MONOCLONAL ANTIBODIES WITH REDUCED IMMUNOGENICITY

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	$1400	$300	$1700	05/25/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
HELMS, LARRY RONALD	1642	530-387300

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Andrea V. Lockenour
2 Elizabeth J. Hecht
3 Edward R. Gimmi

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

SmithKline Beecham

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Philadelphia, Pennsylvania, U.S.A.

☐ Individual ☒ Corporation or other private group entity ☐ Government

Please check the appropriate assignee category or categories (will not be printed on the patent):

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☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.
☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.
NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature _____ Date __April 5, 2005__

Typed or printed name __Andrea V. Lockenour__ Registration No. __51,962__

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07/12/2005 TMILS   00000002 192530   1400.00 DA   300.00 DA   6.00 DA

01 FC:1501   1400.00 DA
02 FC:1504   300.00 DA
03 FC:8001   6.00 DA